

IN THE UNITED STATES DISTRICT COURT
FOR THE DISTRICT OF OREGON

ASHLEY B.,¹

3:19-cv-2074-BR

Plaintiff,

OPINION AND ORDER

v.

COMMISSIONER OF SOCIAL
SECURITY,

Defendant.

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¹ In the interest of privacy this Court uses only the first name and the initial of the last name of the nongovernmental party in this case. Where applicable, this Court uses the same designation for the nongovernmental party's immediate family member.

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BROWN, Senior Judge.

Plaintiff Ashley B. seeks judicial review of the final decision of the Commissioner of the Social Security Administration (SSA) in which the Commissioner denied Plaintiff's applications for Disability Insurance Benefits (DIB) under Title II of the Social Security Act and Supplemental Security Income (SSI) under Title XVI of the Social Security Act. This Court has jurisdiction to review the Commissioner's final decision pursuant to 42 U.S.C. § 405(g).

For the reasons that follow, the Court **AFFIRMS** the decision of the Commissioner and **DISMISSES** this matter.

ADMINISTRATIVE HISTORY

On July 22, 2016, Plaintiff protectively filed his

applications for DIB and SSI benefits. Tr. 13, 201, 203.² Plaintiff alleges a disability onset date of March 30, 2016. Tr. 13, 201, 203. Plaintiff's applications were denied initially and on reconsideration. An Administrative Law Judge (ALJ) held a hearing on November 20, 2018. Tr. 35-60. Plaintiff and a vocational expert (VE) testified at the hearing. Plaintiff was represented by an attorney at the hearing.

On January 30, 2019, the ALJ issued an opinion in which she found Plaintiff is not disabled and, therefore, is not entitled to benefits. Tr. 13-28. Plaintiff requested review by the Appeals Council. On October 30, 2019, the Appeals Council denied Plaintiff's request to review the ALJ's decision, and the ALJ's decision became the final decision of the Commissioner. Tr. 1-2. *See Sims v. Apfel*, 530 U.S. 103, 106-07 (2000).

On December 20, 2019, Plaintiff filed a Complaint in this Court seeking review of the Commissioner's decision.

BACKGROUND

Plaintiff was born on September 21, 1983. Tr. 27, 201, 203. Plaintiff was 32 years old on his alleged disability onset

² Citations to the official Transcript of Record (#9) filed by the Commissioner on April 28, 2020, are referred to as "Tr."

date. Tr. 27, 61. Plaintiff has at least a high-school education. Tr. 27. Plaintiff has past relevant work experience as a cashier/clerk, sales clerk, and mailroom clerk. Tr. 27, 42-44.

Plaintiff alleges disability due to bi-polar disorder, diabetes mellitus type II, chronic low-back pain, asthma, and Post-Traumatic Stress Disorder (PTSD). Tr. 62.

Except as noted, Plaintiff does not challenge the ALJ's summary of the medical evidence. After carefully reviewing the medical records, this Court adopts the ALJ's summary of the medical evidence. See Tr. 18-27.

STANDARDS

The initial burden of proof rests on the claimant to establish disability. *Molina v. Astrue*, 674 F.3d 1104, 1110 (9th Cir. 2012). To meet this burden a claimant must demonstrate his inability "to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which . . . has lasted or can be expected to last for a continuous period of not less than 12 months." 42 U.S.C. § 423(d)(1)(A). The ALJ must develop the record when there is ambiguous evidence or when the record is inadequate to

allow for proper evaluation of the evidence. *McLeod v. Astrue*, 640 F.3d 881, 885 (9th Cir. 2011) (quoting *Mayes v. Massanari*, 276 F.3d 453, 459-60 (9th Cir. 2001)).

The district court must affirm the Commissioner's decision if it is based on proper legal standards and the findings are supported by substantial evidence in the record as a whole. 42 U.S.C. § 405(g). See also *Brewes v. Comm'r of Soc. Sec. Admin.*, 682 F.3d 1157, 1161 (9th Cir. 2012). Substantial evidence is "relevant evidence that a reasonable mind might accept as adequate to support a conclusion." *Molina*, 674 F.3d. at 1110-11 (quoting *Valentine v. Comm'r Soc. Sec. Admin.*, 574 F.3d 685, 690 (9th Cir. 2009)). "It is more than a mere scintilla [of evidence] but less than a preponderance." *Id.* (citing *Valentine*, 574 F.3d at 690).

The ALJ is responsible for evaluating a claimant's testimony, resolving conflicts in the medical evidence, and resolving ambiguities. *Vasquez v. Astrue*, 572 F.3d 586, 591 (9th Cir. 2009). The court must weigh all of the evidence whether it supports or detracts from the Commissioner's decision. *Ryan v. Comm'r of Soc. Sec.*, 528 F.3d 1194, 1198 (9th Cir. 2008). Even when the evidence is susceptible to more than one rational interpretation, the court must uphold the

Commissioner's findings if they are supported by inferences reasonably drawn from the record. *Ludwig v. Astrue*, 681 F.3d 1047, 1051 (9th Cir. 2012). The court may not substitute its judgment for that of the Commissioner. *Widmark v. Barnhart*, 454 F.3d 1063, 1070 (9th Cir. 2006).

DISABILITY ANALYSIS

I. The Regulatory Sequential Evaluation

At Step One the claimant is not disabled if the Commissioner determines the claimant is engaged in substantial gainful activity (SGA). 20 C.F.R. §§ 404.1520(a)(4)(i), 416.920(a)(4)(i). See also *Keyser v. Comm'r of Soc. Sec.*, 648 F.3d 721, 724 (9th Cir. 2011).

At Step Two the claimant is not disabled if the Commissioner determines the claimant does not have any medically severe impairment or combination of impairments. 20 C.F.R. §§ 404.1509, 404.1520(a)(4)(ii), 416.920(a)(4)(ii). See also *Keyser*, 648 F.3d at 724.

At Step Three the claimant is disabled if the Commissioner determines the claimant's impairments meet or equal one of the listed impairments that the Commissioner acknowledges are so severe as to preclude substantial gainful activity. 20 C.F.R.

§§ 404.1520(a)(4)(iii), 416.920(a)(4)(iii). See also *Keyser*, 648 F.3d at 724. The criteria for the listed impairments, known as Listings, are enumerated in 20 C.F.R. part 404, subpart P, appendix 1 (Listed Impairments).

If the Commissioner proceeds beyond Step Three, he must assess the claimant's residual functional capacity (RFC). The claimant's RFC is an assessment of the sustained, work-related physical and mental activities the claimant can still do on a regular and continuing basis despite his limitations. 20 C.F.R. §§ 404.1520(e), 416.920(e). See also Social Security Ruling (SSR) 96-8p. "A 'regular and continuing basis' means 8 hours a day, for 5 days a week, or an equivalent schedule." SSR 96-8p, at *1. In other words, the Social Security Act does not require complete incapacity to be disabled. *Taylor v. Comm'r of Soc. Sec. Admin.*, 659 F.3d 1228, 1234-35 (9th Cir. 2011) (citing *Fair v. Bowen*, 885 F.2d 597, 603 (9th Cir. 1989)).

At Step Four the claimant is not disabled if the Commissioner determines the claimant retains the RFC to perform work he has done in the past. 20 C.F.R. §§ 404.1520(a)(4)(iv), 416.920(a)(4)(iv). See also *Keyser*, 648 F.3d at 724.

If the Commissioner reaches Step Five, he must determine whether the claimant is able to do any other work that exists in

the national economy. 20 C.F.R. §§ 404.1520(a)(4)(v), 416.920(a)(4)(v). See also *Keyser*, 648 F.3d at 724-25. Here the burden shifts to the Commissioner to show a significant number of jobs exist in the national economy that the claimant can perform. *Lockwood v. Comm'r Soc. Sec. Admin.*, 616 F.3d 1068, 1071 (9th Cir. 2010). The Commissioner may satisfy this burden through the testimony of a VE or by reference to the Medical-Vocational Guidelines (or the grids) set forth in the regulations at 20 C.F.R. part 404, subpart P, appendix 2. If the Commissioner meets this burden, the claimant is not disabled. 20 C.F.R. §§ 404.1520(g)(1), 416.920(g)(1).

ALJ'S FINDINGS

At Step One the ALJ found Plaintiff has not engaged in substantial gainful activity since March 30, 2016, Plaintiff's alleged disability onset date. Tr. 15.

At Step Two the ALJ found Plaintiff has the severe impairments of obesity, degenerative disc disease of the lumbar spine, depression, PTSD, and substance abuse. Tr. 16.

At Step Three the ALJ concluded Plaintiff's medically determinable impairments do not meet or medically equal one of the listed impairments in 20 C.F.R. part 404, subpart P,

appendix 1. Tr. 16. The ALJ found Plaintiff has the RFC to perform light work with the following limitations: can frequently lift and carry ten pounds; can occasionally lift and carry 20 pounds; can stand and/or walk for six hours in an eight-hour workday; can sit for eight hours in an eight-hour workday; can frequently climb ramps and stairs; can never climb ladders, ropes, or scaffolds; can occasionally stoop, kneel, crouch, and crawl; can remember, understand, and carry out routine, repetitive tasks with a GED level of 2 or less that can be learned in a period of 30 days or by demonstration; cannot perform fast-paced production work; can have occasional superficial interaction with the general public; and can work in proximity to coworkers, but should not perform tasks that require teamwork. Tr. 17-18.

At Step Four the ALJ concluded Plaintiff is unable to perform his past relevant work. Tr. 27.

At Step Five the ALJ found Plaintiff can perform other jobs that exist in the national economy such as room-cleaner, laundry worker and retail-price marker. Tr. 27-28. Accordingly, the ALJ found Plaintiff is not disabled. Tr. 28.

DISCUSSION

Plaintiff contends the ALJ erred when she (1) failed to provide legally sufficient reasons for discounting Plaintiff's subjective symptom testimony and (2) failed to provide legally sufficient reasons for rejecting the medical opinions of Lindsay Heydenrych, Psy.D., an examining psychologist, and Brinn Culver, Professional Mental Health Nurse Practitioner (PMHNP), Plaintiff's treating therapist.

I. The ALJ did not err when she discounted Plaintiff's subjective symptom testimony.

Plaintiff contends the ALJ erred when she failed to provide legally sufficient reasons for discounting Plaintiff's subjective symptom testimony.

A. Standards

The ALJ engages in a two-step analysis to determine whether a claimant's testimony regarding subjective pain or symptoms is credible. "First, the ALJ must determine whether the claimant has presented objective medical evidence of an underlying impairment 'which could reasonably be expected to produce the pain or other symptoms alleged.'" *Garrison v. Colvin*, 759 F.3d 995, 1014 (9th Cir. 2014) (quoting *Lingenfelter v. Astrue*, 504 F.3d 1028, 1035-36 (9th Cir. 2007)). The claimant need not show his "impairment could reasonably be

expected to cause the severity of the symptom [he] has alleged; [he] need only show that it could reasonably have caused some degree of the symptom." *Garrison*, 759 F.3d at 1014 (quoting *Smolen v. Chater*, 80 F.3d 1273, 1282 (9th Cir. 1996)). A claimant is not required to produce "objective medical evidence of the pain or fatigue itself, or the severity thereof." *Garrison*, 759 F.3d at 1014.

If the claimant satisfies the first step of this analysis and there is not any affirmative evidence of malingering, "the ALJ can reject the claimant's testimony about the severity of [his] symptoms only by offering specific, clear and convincing reasons for doing so." *Garrison*, 759 F.3d at 1014-15. See also *Robbins v. Soc. Sec. Admin.*, 466 F.3d 880, 883 (9th Cir. 2006) (same). General assertions that the claimant's testimony is not credible are insufficient. *Parra v. Astrue*, 481 F.3d 742, 750 (9th Cir. 2007). The ALJ must identify "what testimony is not credible and what evidence undermines the claimant's complaints." *Id.* (quoting *Lester v. Chater*, 81 F.3d 821, 834 (9th Cir. 1995)).

B. Analysis

Plaintiff testified he stays home "a lot of the time" because of his high anxiety, and it is "too much for [him] to

deal with people." Tr. 44-45. He also stated he experiences stress when he is given tasks that he doesn't know how to break down in order to accomplish and that he is unable to finish. Tr. 48. Plaintiff stated he experiences low-back pain when he lifts more than 25 pounds and when he bends and pulls. Tr. 52-53.

The ALJ discounted Plaintiff's testimony on the grounds that (1) Plaintiff's statements regarding his limitations are inconsistent with the medical record and with his activities of daily living, (2) Plaintiff reported his mental impairments are more disabling than his physical impairments, and (3) Plaintiff's mental impairments improved with treatment. Tr. 18-24. For example, the medical records reflect in December 2016 Plaintiff had normal muscle strength, muscle tone, and gait. Tr. 19, 673. In November 2017 Plaintiff had normal range of motion and did not exhibit any tenderness. Tr. 19, 1415. In July 2018 Plaintiff denied joint pain, and in August 2018 he had normal gait and station. Tr. 19, 1303, 1306. Moreover, Plaintiff declined referrals for physical therapy, acupuncture, and yoga to treat his low back. Tr. 19, 1201.

The ALJ noted Plaintiff's mental conditions were stable when he was following his treatment regimen. Tr. 20.

For example, in March 2016 Plaintiff reported he was "good" when he took his medications. Tr. 20, 538. In September 2016 Plaintiff reported his mood and anxiety were "fine," and in March 2017 Plaintiff reported he did not have any depression, anxiety, or agitation. Tr. 21, 995, 1232. In February 2018 Plaintiff also reported he was doing well and was stable. Tr. 22, 841. In August 2018 Plaintiff was open and smiling, he was compliant with his medication regimen, and he spoke highly of how he was treated by coworkers. Tr. 23, 825.

Ultimately the ALJ concluded Plaintiff's activities of daily living are inconsistent with his alleged limitations. Tr. 23-24. For example, Plaintiff testified he worked well with coworkers even though he alleged in his Complaint that he experiences high anxiety dealing with people and he stated he still has friends from his former workplace. Tr. 46-47. The ALJ also noted Plaintiff generally takes the bus for transportation, is able to perform personal care, prepares meals, does his own laundry, and spends time with friends in various activities. Tr. 45, 821, 869, 1354.

On this record the Court finds the ALJ did not err when she discounted Plaintiff's subjective symptom testimony because the ALJ provided legally sufficient reasons supported by

substantial evidence in the record for doing so.

II. The ALJ did not err in her assessment of the medical opinions of Dr. Heydenrych and PMHNP Culver.

Plaintiff contends the ALJ erred when she failed to provide legally sufficient reasons for rejecting the medical opinions of Dr. Heydenrych, an examining psychologist, and PMHNP Culver, Plaintiff's treating therapist.

A. Standards

"In disability benefits cases . . . physicians may render medical, clinical opinions, or they may render opinions on the ultimate issue of disability - the claimant's ability to perform work." *Garrison v. Colvin*, 759 F.3d 995, 1012 (9th Cir. 2014). "In conjunction with the relevant regulations, [courts] have . . . developed standards that guide [the] analysis of an ALJ's weighing of medical evidence." *Ryan v. Comm'r of Soc. Sec.*, 528 F.3d 1194, 1198 (9th Cir. 2008).

"If a treating or examining doctor's opinion is contradicted by another doctor's opinion, an ALJ may only reject it by providing specific and legitimate reasons that are supported by substantial evidence." *Id.* When contradicted, a treating or examining physician's opinion is still owed deference and will often be "entitled to the greatest weight . . . even if it does not meet the test for controlling

weight." *Orn v. Astrue*, 495 F.3d 625, 633 (9th Cir. 2007). An ALJ can satisfy the "substantial evidence" requirement by "setting out a detailed and thorough summary of the facts and conflicting clinical evidence, stating his interpretation thereof, and making findings." *Reddick*, 157 F.3d at 725. "The ALJ must do more than state conclusions. He must set forth his own interpretations and explain why they, rather than the doctors', are correct." *Id.* (citation omitted).

Medical sources are divided into two categories: "acceptable medical sources" and "other sources." 20 C.F.R. § 416.913. Acceptable medical sources include licensed physicians and psychologists. 20 C.F.R. § 416.913(a). Medical sources classified as "other sources" include, but are not limited to, nurse practitioners, therapists, licensed clinical social workers, and chiropractors. 20 C.F.R. § 416.913(d).

With respect to "other sources," the Social Security Administration Regulations provide:

With the growth of managed health care in recent years and the emphasis on containing medical costs, medical sources who are not acceptable medical sources, such as nurse practitioners, physician assistants, and licensed clinical social workers, have increasingly assumed a greater percentage of the treatment and evaluation functions previously handled primarily by physicians and psychologists. Opinions from these medical sources, who are not technically

deemed acceptable medical sources under our rules, are important and should be evaluated on key issues such as impairment severity and functional effects, along with the other relevant evidence in the file.

SSR 06-03p, at *3. Factors the ALJ should consider when determining the weight to give an opinion from those "important" sources include the length of time the source has known the claimant, the number of times and frequency that the source has seen the claimant, the consistency of the source's opinion with other evidence in the record, the relevance of the source's opinion, the quality of the source's explanation of his opinion, and the source's training and expertise. SSR 06-03p, at *4. On the basis of the particular facts and the above factors the ALJ may assign an "other source" either greater or lesser weight than that of an acceptable medical source. SSR 06-03p, at *5-6. The ALJ, however, must explain the weight assigned to such sources so that a claimant or subsequent reviewer may follow the ALJ's reasoning. SSR 06-03p, at *6. "The ALJ may discount testimony from . . . 'other sources' if the ALJ 'gives reasons germane to each witness for doing so.'" *Molina*, 674 F.3d at 1111 (quoting *Turner v. Comm'r Soc. Sec. Admin.*, 613 F.3d 1217, 1224 (9th Cir. 2010)).

B. Analysis

1. Dr. Heydenrych

On June 24, 2016, Dr. Heydenrych performed a comprehensive psychological examination of Plaintiff. Tr. 655-61. Dr. Heydenrych diagnosed Plaintiff with chronic PTSD, persistent depressive disorder with persistent major depressive episodes, unspecified Attention-Deficit/Hyperactivity Disorder (ADHD), and Alcohol-Use Disorder in sustained remission. Tr. 659. Dr. Heydenrych opined Plaintiff has severe functional interference from his PTSD and chronic depression; has ongoing, severe difficulty organizing his behavior adequately to perform work tasks; is likely to be severely hindered in his ability to perform adaptive, goal-directed activities and even rote and repetitive tasks; and has significant difficulties functioning in a competitive work environment and completing a normal work-day or work week. Tr. 660. Dr. Heydenrych also noted, however, Plaintiff may see some improvement of his functioning with continued, consistent, long-term psychotherapy and a medication regimen, but Plaintiff's longstanding anxiety, depression, and medical problems will not remit within the next 12 months. Tr. 660. Dr. Heydenrych also noted Plaintiff's psychiatric

conditions do not significantly interfere with Plaintiff's rational thinking or decision-making, and Plaintiff's judgment and cognitive functioning were generally intact. Tr. 661.

The ALJ found Dr. Heydenrych's opinion supported limiting Plaintiff to simple routine repetitive tasks, but the ALJ gave "limited weight" to the rest of Dr. Heydenrych's opinion on the ground, among other things, that Dr. Heydenrych relies heavily on Plaintiff's subjective report of symptoms and limitations, which are not fully supported by the record, and that Dr. Heydenrych's opinion is inconsistent with the medical evidence and Plaintiff's activities of daily living. Tr. 25. For example, in July 2016 Plaintiff reported he had "interest and pleasure in doing things" and was not feeling down, depressed, or hopeless. Tr. 463. In September 2016 Plaintiff reported his mood and anxiety were "fine," and he was pleasant, engaged, he had good eye contact, his mood and affect were congruent, and his judgment and insight were adequate even though he indicated he was depressed "most days." Tr. 995. The ALJ also noted Plaintiff is physically active, is self-reliant in his personal care, prepares meals, helps his mother in her salon, spends time with friends, and "gets along well with everyone." Tr. 23, 45-47, 821, 869, 1354. "An ALJ may reject a

treating physician's opinion if it is based 'to a large extent' on a claimant's self-reports that have been properly discounted as incredible." *Tommasetti v. Astrue*, 533 F.3d 1035, 1041 (9th Cir. 2008) (citations omitted). Here the Court has concluded the ALJ properly discounted Plaintiff's subjective symptom testimony,

The ALJ also noted Dr. Heydenrych based at least part of her assessment of Plaintiff's limitations on his physical impairments such as ADHD based in part on Plaintiff's reported history of ADHD. Tr. 659, 661. Dr. Heydenrych noted Plaintiff's "medical issues can exacerbate problems with mood stability, irritability, concentration, and memory, because of the cognitive effort placed toward managing pain." Tr. 661. A doctor's specialization is relevant when determining the weight to give their opinion, and Dr. Heydenrych is a licensed psychologist. 20 C.F.R. §§404.1527(c)(5), 416.927(c)(5); Tr. 661. The ALJ pointed out that Plaintiff's physical impairments are outside of Dr. Heydenrych's area of expertise. Tr. 25. Dr. Heydenrych, in fact, noted "[f]ully assessing for attention deficit disorders goes beyond the scope of [her] evaluation." Tr. 661. Accordingly, as Dr. Heydenrych noted, an assessment of Plaintiff's mental health based on alleged

physical conditions is beyond the scope of her expertise.

On this record the Court concludes the ALJ did not err when she discounted Dr. Heydenrych's opinion because the ALJ provided legally sufficient reasons supported by substantial evidence in the record for doing so.

2. PMHNP Culver

On October 25, 2018, PMHNP Culver completed a Mental Residual functional Capacity Assessment. Tr. 1375-77. PMHNP Culver diagnosed Plaintiff with PTSD, major depressive disorder, borderline personality disorder, rule-out dissociative identity disorder, and alcohol-use disorder. Tr. 1375. She opined Plaintiff has extreme limitations in his ability to understand, to remember, and to carry out detailed instructions; extreme limitations in his ability to use reason and judgment to make work-related decisions; moderate limitations in his ability to remember locations and work-like procedures with reminders; and moderate limitations in his ability to understand, to remember, and to carry out short and simple repetitive instructions or tasks. Tr. 1375. PMHNP Culver stated Plaintiff dissociates under pressure, he needs written instructions and frequent reminders, and his self-esteem impacts his decision-making. Tr. 1375. PMHNP Culver noted Plaintiff needs in-person

supervision at least 50 percent of the workday. Tr. 1376.

PMHNP Culver opined Plaintiff has extreme limitations in his ability to interact appropriately with the general public and customers, to understand and to respond to social cues, to ask simple questions or request assistance from supervisors or coworkers, and to work cooperatively and handle conflicts.

Tr. 1376. She also noted Plaintiff has moderate limitations in his ability to keep social interactions free of excessive irritability, sensitivity, argumentativeness, suspiciousness, or other inappropriate behavior, and Plaintiff is quick to shut down and to dissociate in social settings. Tr. 1376.

In addition, PMHNP Culver indicated Plaintiff has extreme limitations in his ability to ignore or to avoid distractions while working; to work close to or with others without interrupting or distracting them; to sustain an ordinary routine and regular attendance; and to work a full day and full work week without needing more than the allotted number or length of rest periods during the day. Tr. 1376. She opined Plaintiff's attention and concentration would be impaired for 75 percent of the workday. Tr. 1377. Finally, PMHNP Culver indicated Plaintiff has extreme limitations in his ability to respond to demands, to adapt to changes, to manage psychologically-based

symptoms, to set realistic goals, and to make plans independently of others. Tr. 1377. She also indicated Plaintiff has marked limitations in his ability to be aware of normal hazards or to take appropriate precautions, moderate limitations in his ability to distinguish between acceptable and unacceptable work performance, and mild limitations in his ability to maintain personal hygiene and attire appropriate to a work setting. Tr. 1377.

The ALJ found PMHNP Culver's opinion supported limiting Plaintiff to simple routine repetitive tasks rather than fast-paced production work, but the ALJ gave "limited weight" to PMHNP Culver's findings of marked and extreme limitations on the grounds that they are inconsistent with the medical evidence and Plaintiff's reports as to his activities of daily living. Tr. 26. For example, the ALJ noted Plaintiff's social activities and friendships "belie" the extreme social limitations found by PMHNP Culver. Tr. 26. The ALJ noted Plaintiff is physically active, is self-reliant in his personal care, prepares meals, helps his mother in her salon, spends time with friends, and "gets along well with everyone." Tr. 23, 45-47, 821, 869, 1354. The ALJ also noted PMHNP Culver's mental-status examinations do not support her findings because she

regularly indicates Plaintiff has good eye contact and is engaged in therapy. Tr. 26. Inconsistency between the medical evidence and witness testimony constitutes a germane reason to discredit such testimony. *Bayliss v. Barnhart*, 427 F.3d 1211, 1218 (9th Cir. 2005).

On this record the Court concludes the ALJ did not err when she discounted PMHNP Culver's opinion because the ALJ provided germane reasons supported by substantial evidence in the record for doing so.

CONCLUSION

For these reasons, the Court **AFFIRMS** the decision of the Commissioner and **DISMISSES** this matter.

IT IS SO ORDERED.

DATED this 7th day of December, 2020.

/s/ Anna J. Brown

ANNA J. BROWN
United States Senior District Judge